Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 1 of 49

Fill in this information to identify your case:			
United States Bankruptcy Court for the:			
SOUTHERN DISTRICT OF OHIO	_		
Case number (if known)	_ Chapter you are filing under:		
	Chapter 7		
	☐ Chapter 11		
	☐ Chapter 12		
	☐ Chapter 13	_	Check if this an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Heather First name  Nichole Middle name  Kyle Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1486	

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 2 of 49

Debtor 1 Heather Nichole Kyle

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		6226 Hillside Avenue Cincinnati, OH 45233			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Hamilton County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 3 of 49

Debtor 1 Heather Nichole Kyle

Case number (if known)

Par	Tell the Court About	Your E	3ankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> page 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bankru e box.	uptcy
	choosing to file under	■ Chapter 7					
			Chapter 11				
			Chapter 12				
			Chapter 13				
			·				
8.	How you will pay the fee		about how yo	u may pay. Typi attorney is subm	cally, if you are paying the fee yo	k with the clerk's office in your local court for more urself, you may pay with cash, cashier's check, or alf, your attorney may pay with a credit card or che	r money
					allments. If you choose this option (Official Form 103A).	on, sign and attach the Application for Individuals t	to Pay
						n only if you are filing for Chapter 7. By law, a judg	
			applies to you	ur family size and	d you are unable to pay the fee in	ur income is less than 150% of the official poverty n installments). If you choose this option, you must ial Form 103B) and file it with your petition.	
9.	Have you filed for bankruptcy within the	■ N					
	last 8 years?	ПΥ			M/h a a	Coop aughor	
			District		When	Case number Case number	
			District District		When	Case number	
			District		wilen	Case Humber	
10.	Are any bankruptcy cases pending or being	■ N	0				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	ΠY	es.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ N	lo. Go to l	ine 12.			
		ΠY	es. Has yo	ur landlord obtai	ned an eviction judgment agains	t you?	
				No. Go to line 1	2.		
				Yes. Fill out <i>Init</i> this bankruptcy		Judgment Against You (Form 101A) and file it as p	oart of

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 4 of 49

		Document	raye 4 01 43	
ebtor 1	Heather Nichole Kyle		Case number (if know	n)

ar	Report About Any Bu	sinesses `	You Own	as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of bus	siness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any				
	If you have more than one sole proprietorship, use a		Numbe	er, Street, City, Stat	te & ZIP Code			
	separate sheet and attach it to this petition.		Check	the appropriate bo	ox to describe your business:			
	·			Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))			
		Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))			Estate (as defined in 11 U.S.C. § 101(51B))			
			Stockbroker (as defined in 11 U.S.C. § 101(53A))					
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	e			
13.	Are you filing under Chapter 11, the court must know whether you are a small business debtor so that it can set deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most recent balance sheet, and set operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the in 11 U.S.C. 1116(1)(B).			a small business debtor, you must attach your most recent balance sheet, statement of				
	For a definition of small	■ No.	I am n	ot filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankre Code.				
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
ar	t 4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and	Yes.	What is t	he hazard?				
	identifiable hazard to public health or safety? Or do you own any property that needs			iate attention is why is it needed?				
	immediate attention?		noodod,	y io it nocuou:				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?				
					Number, Street, City, State & Zip Code			

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 5 of 49

Debtor 1 Heather Nichole Kyle

Case number (if known)

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 6 of 49

Deb	tor 1 Heather Nichole K	(yle		Case numb	er (if known)			
Par	t 6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.		onsumer debts? Consumer debts are def sonal, family, or household purpose."	ined in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.		<b>Are your debts primarily business debts?</b> <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you o	owe that are not consumer debts or busine	ss debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	Yes.	I am filing under Chapter 7. I are paid that funds will be av	Do you estimate that after any exempt propagallable to distribute to unsecured creditors	perty is excluded and administrative expenses?			
	administrative expenses		■ No					
	are paid that funds will be available for		☐ Yes					
	distribution to unsecured creditors?							
18.	How many Creditors do	<b>■</b> 1-49		□ 1,000-5,000	☐ 25,001-50,000			
	you estimate that you owe?	☐ 50-99		□ 5001-10,000	<b>5</b> 0,001-100,000			
		□ 100-1 □ 200-9		□ 10,001-25,000	☐ More than100,000			
19.	How much do you	<b>\$</b> 0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
	be worth?		001 - \$500,000	□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion			
		<b>□</b> \$500,	001 - \$1 million	☐ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
Par	t 7: Sign Below							
	you	I have ex	camined this petition, and I de	clare under penalty of perjury that the infor	mation provided is true and correct.			
	•		, ,	7, I am aware that I may proceed, if eligible	•			
				elief available under each chapter, and I c				
				not pay or agree to pay someone who is not pay or agree to pay someone who is not pay or agree to pay someone who is not pay or agree to pay someone who is not pay or agree to pay someone who is not pay or agree to pay someone who is not pay or agree to pay someone who is not pay or agree to pay someone who is not pay or agree to pay someone who is not pay so that the pay someone who is not pay so that the pay so the pay so that the pay so that the pay so the pay so that th	ot an attorney to help me fill out this			
		I request	relief in accordance with the	chapter of title 11, United States Code, spe	ecified in this petition.			
		bankrupt and 3571	cy case can result in fines up	, concealing property, or obtaining money to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
			ther Nichole Kyle	Signature of Debto	or 2			
			r <b>Nichole Kyle</b> e of Debtor 1	Signature of Debto	JI Z			
		Executed		Executed on				
			MM / DD / YYYY	MN	/I / DD / YYYY			

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 7 of 49

Debtor 1 Heather Nichole Kyle Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Eric A. Steiden, Esq. OH:	Date	September 5, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Eric A. Steiden, Esq. OH: 0063978 KY: 88321		
Printed name		
Steiden Law Offices		
Firm name		
411 Madison Avenue		
Covington, KY 41011		
Number, Street, City, State & ZIP Code		
Contact phone (513) 888-8888	Email address	esteiden@steidenlaw.com
OH: 0063978 KY: 88321 OH		
Bar number & State		

		Docum	ent Page 8 of 49	
Fill in this inform	mation to identify your	case:		
Debtor 1	Heather Nichole I	Kyle		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number _ (if known)				☐ Check if this is an amended filing
				· ·

# Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

		Your as	nanta
			f what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	26,212.36
	1c. Copy line 63, Total of all property on Schedule A/B	\$	26,212.36
Pai	t 2: Summarize Your Liabilities		
		Your lia	abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	16,737.01
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	62,846.42
	Your total liabilities	\$	79,583.43
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,817.01
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,814.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	edules.
7.	■ Yes What kind of debt do you have?		

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 1:19-bk-13328 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Doc 1 Page 9 of 49 Case number (if known) Document

Debtor 1 Heather Nichole Kyle

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,124.14 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	l claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	48,160.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ _	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	48,160.00

		Document	Page 10 of 49		
Fill in this inf	ormation to identify your	case and this filing:			
Debtor 1	Heather Nichole F	(vle			
20010.	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	SOUTHERN DISTRICT OF OHI	0		
0	•				_
Case number			_		☐ Check if this is an amended filing
					g
Official F	Form 106A/B				
Schedi	ule A/B: Prop	ertv			12/15
		e items. List an asset only once. If	an asset fits in more than or	ne category, list the asset i	
hink it fits best	. Be as complete and accura- nore space is needed, attach	te as possible. If two married peopl a separate sheet to this form. On th	e are filing together, both are	re equally responsible for s	supplying correct
Part 1: Descr	ibe Each Residence, Building	, Land, or Other Real Estate You Ov	wn or Have an Interest In		
1 Do you our	or have any local or equitable	e interest in any residence, building	land or similar property?		
i. Do you own	or have any legal of equitable	e interest in any residence, building	, land, or similar property?		
No. Go to	Part 2.				
☐ Yes. Whe	re is the property?				
Part 2: Descr	ibe Your Vehicles				
3. Cars, vans  □ No ■ Yes	, trucks, tractors, sport uti	ility vehicles, motorcycles			
	Ford			Do not deduct secured	claims or exemptions. Put
3.1 Make:	Ford Focus SE Sedan	Who has an interest in th	e property? Check one	the amount of any secur	red claims on Schedule D:
Model:	2017	Debtor 1 only		Creditors who have Cla	aims Secured by Property.
Year:	mate mileage: 36,0	Debtor 2 only  Debtor 1 and Debtor 2	only	Current value of the entire property?	Current value of the portion you own?
	formation:	At least one of the debi	•	onino proporty :	portion you own.
Kelley	1			•	
		☐ Check if this is comm	unity property	\$11,518.00	\$11,518.00
		(see instructions)			
Examples: E  No Yes  Add the de	Boats, trailers, motors, perso	TVs and other recreational vehional watercraft, fishing vessels, sronal watercraft fishing vessels, sronal watercraft fishing vessels, sronal watercraft, fishing vessels, sronal watercraft fishing vessels, sronal watercraft, sronal watercraft, fishing vessels, sronal watercraft, fishing	nowmobiles, motorcycle ac	y entries for	\$11,518.00
Part 3: Descr	ibe Your Personal and House	ehold Items			
		able interest in any of the follow	ving items?		Current value of the portion you own? Do not deduct secured
6. Household	goods and furnishings				claims or exemptions.
	Major appliances, furniture,	linens, china, kitchenware			

□ No
Official Form 106A/B
Schedule A/B: Property

Debtor 1	Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:0  Document Page 11 of 49  Case number (if known)	
_	s. Describe	
	Bed, nightstand, dresser, cocuh, TV stand lamps, kitchenware and dishes	\$200.00
□ No	<ul> <li>ponics</li> <li>poles: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games</li> <li>s. Describe</li> </ul>	collections; electronic devices
	Computer	\$100.00
Exam  No □ Yes  P. Equip	tibles of value  bles: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coir other collections, memorabilia, collectibles  bles: Describe  nent for sports and hobbies  bles: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	
■ No	musical instruments  Describe	
■ No	rms nples: Pistols, rifles, shotguns, ammunition, and related equipment s. Describe	
☐ No	es  nples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  Describe	
	Clothing	\$250.00
□ No	Iry Inples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,  Describe  Misc. jewelry	gold, silver <b>\$400.0</b> 0
Exar	farm animals  nples: Dogs, cats, birds, horses  Describe	
	Dog	\$0.00
■ No	other personal and household items you did not already list, including any health aids you did not list	
	the dollar value of all of your entries from Part 3, including any entries for pages you have attached	\$950.00

Official Form 106A/B Schedule A/B: Property

page 2

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09

Document Page 12 of 49 Case number (if known) Debtor 1 **Heather Nichole Kyle** Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes..... Cash on hand \$15.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... 5/3 Bank \$1,000,00 Checking 17.1. 5/3 Bank \$7.00 17.2. Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 403(b) **TransAmerica** \$12,722.36

## 22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

■ No Institution name or individual: ☐ Yes. .....

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No Issuer name and description. ☐ Yes.....

Deb	otor 1		J-DK-13328 lichole Kyle		Document	Page 13 of 49 Cas	se number (if known)	Desc Main
2			<b>ation IRA, in an a</b> 1), 529A(b), and 52		qualified ABLE p	ogram, or under a qualifi	ied state tuition progra	m.
			Institution name a	and description	on. Separately file	the records of any interests	s.11 U.S.C. § 521(c):	
	No	-	future interests information about		other than anythi	ng listed in line 1), and ri	ghts or powers exercis	sable for your benefit
	<i>Exam</i> ■ No	ples: Internet o	s, trademarks, tradedomain names, we information about	bsites, proce		ual property and licensing agreements		
•	<i>Exam</i> ■ No	ples: Building	es, and other gene permits, exclusive information about	licenses, coc		on holdings, liquor licenses	s, professional licenses	
Mor	ney or	property owe	ed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
	No	funds owed t		them, includii	ng whether you alr	eady filed the returns and t	the tax years	
•	<i>Exam</i> ■ No	,	or lump sum alimo	ony, spousal	support, child supp	port, maintenance, divorce	settlement, property sett	tlement
								ion Social Socurity
	Exam ■ No	<i>ples:</i> Unpaid w	unpaid loans you	surance payn made to som	nents, disability be leone else	nefits, sick pay, vacation pa	ay, workers' compensat	ion, Social Security
31.	■ No □ Yes. Interest	ples: Unpaid w benefits; . Give specific sts in insuran	vages, disability ins unpaid loans you information ce policies	made to som	eone else	nefits, sick pay, vacation pa		ion, Social Security
31.	■ No ■ Yes. Interese Exame	ples: Unpaid w benefits; . Give specific sts in insuran ples: Health, d	vages, disability ins unpaid loans you information ce policies	made to som urance; healt	eone else h savings account			Surrender or refund value:
31.	■ No □ Yes. Interese Exam ■ No □ Yes.  Any interese Exam ■ No □ Yes.	ples: Unpaid we benefits; Give specifice sts in insurant ples: Health, de Name the insurerest in properties.	vages, disability insumpaid loans you unpaid loans you information vee policies lisability, or life insumance company of Company of Company of a living true.	urance; healt  of each policy  name:	h savings account and list its value.	(HSA); credit, homeowner' Beneficiary:	's, or renter's insurance	Surrender or refund value:
31. I	■ No □ Yes. Interese Exam ■ No □ Yes. Any in If you some of No □ Yes.  Claims Exam ■ No	ples: Unpaid we benefits;  Give specific sts in insurant ples: Health, do and the insurent terest in propare the benefit one has died.  Give specific stagainst third stagains	vages, disability insurance company of Compa	urance; healt of each policy or name:  rou from son st, expect pro	h savings account and list its value.  neone who has d oceeds from a life i	(HSA); credit, homeowner'  Beneficiary:  ied  insurance policy, or are cur	's, or renter's insurance	Surrender or refund value:

Schedule A/B: Property

 $\hfill\square$  Yes. Describe each claim.......

■ No

Official Form 106A/B

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Document Page 14 of 49 Case number (if known) Debtor 1 **Heather Nichole Kyle** 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$13.744.36 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Part 6 Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 ..... \$0.00 56. Part 2: Total vehicles, line 5 \$11,518.00 57. Part 3: Total personal and household items, line 15 \$950.00 Part 4: Total financial assets, line 36 \$13,744.36 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

Total personal property. Add lines 56 through 61...

\$26,212.36

\$26,212.36

Official Form 106A/B Schedule A/B: Property page 5

\$26,212.36

Copy personal property total

			111 1 111111 111 711 71 7	<del>10</del>
Fill in this infor	rmation to identify your	case:		
Debtor 1	Heather Nichole	Kyle		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				☐ Check if this
(				amended fil

# Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

<ol> <li>Which set of exemptions are you claiming? Check one only, even if your spouse is filing wi</li> </ol>
--

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exen portion you own		ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Check only one box for each exemption. Schedule A/B				
Bed, nightstand, dresser, cocuh, TV stand lamps, kitchenware and dishes	\$200.00		\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	2020.00(\(\)(\(\)(\(\))	
Computer Line from Schedule A/B: 7.1	\$100.00		\$100.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Lille Holli Schedule Av.B. 111			100% of fair market value, up to any applicable statutory limit	2020.00(1)(4)(4)	
Clothing Line from Schedule A/B: 11.1	\$250.00		\$250.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Life from Schedule AVB. 11.1			100% of fair market value, up to any applicable statutory limit	2323.00(A)(4)(a)	
Cash on hand Line from Schedule A/B: 16.1	\$15.00		\$15.00	Ohio Rev. Code Ann. § 2329.66(A)(18)	
Ellie IIIIII Schedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(10)	
Checking: 5/3 Bank Line from Schedule A/B: 17.1	\$1,000.00		\$500.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
Line Holli Schedule AVB. 11.1			100% of fair market value, up to any applicable statutory limit	2020.00(1)(0)	

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 16 of 49

Case number (if known)

De	neather Nichole Kyle			Case number (ii known)		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che			
	Checking: 5/3 Bank Line from Schedule A/B: 17.1	\$1,000.00		\$500.00	Ohio Rev. Code Ann. § 2329.66(A)(18)	
				100% of fair market value, up to any applicable statutory limit		
	Savings: 5/3 Bank Line from Schedule A/B: 17.2	\$7.00		\$7.00	Ohio Rev. Code Ann. § 2329.66(A)(18)	
	Ellie Holli Golloddie 772. TTIE			100% of fair market value, up to any applicable statutory limit		
	403(b): TransAmerica Line from Schedule A/B: 21.1	\$12,722.36		\$12,722.36	Ohio Rev. Code Ann. § 2329.66(A)(10)(b)	
L	Ellie Holli Golloddie 772. 2111			100% of fair market value, up to any applicable statutory limit	2020.00(\(\text{A}\)(10)(\(\text{D}\)	
	403(b): TransAmerica Line from Schedule A/B: 21.1	\$12,722.36		100%	Ohio Rev. Code Ann. § 2329.66(A)(10)(c)	
	Line nom Schedule AVB. 2111			100% of fair market value, up to any applicable statutory limit	2023.00(A)(10)(0)	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every			led on or after the date of adjustmer	ıt.)	
	No					
	☐ Yes. Did you acquire the property cover	ed by the exemption wi	thin 1	,215 days before you filed this case	?	
	□ No					
	☐ Yes					

Ouse	1.10 DK 1002	Document	Page 17	of 49	0.04.00	) Wall
Fill in this inform	ation to identify yo					
Debtor 1	Heather Nichol	e Kvle				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	kruptcy Court for the	SOUTHERN DISTRICT OF OF	110			
Case number					_	if this is an led filing
Official Form	106D					
		a Wha Haya Claima	C	d by Changert		4044
schedule	D: Creditors	s Who Have Claims	Secured	by Property	<u>y</u>	12/15
		If two married people are filing togeth out, number the entries, and attach it				
I. Do any creditors	have claims secured b	y your property?				
☐ No. Check	this box and submit	this form to the court with your other	schedules. Yo	ou have nothing else to	report on this form.	
Yes. Fill in	all of the information	below.				
Part 1: List Al	Secured Claims					
		more than one secured claim, list the cre			Column B	Column C
		s a particular claim, list the other creditors tical order according to the creditor's nam		Amount of claim  Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 GM Finance		Describe the property that secures	the claim:	\$16,737.01	\$11,518.00	\$0.00
Creditor's Name		2017 Ford Focus SE Sedan	36,000+			
DO D 70	14.40	Kelley As of the date you file, the claim is:	Check all that			
PO Box 78	3143 AZ 85062-8143	apply.				
	City, State & Zip Code	☐ Contingent ☐ Unliquidated				
	,,	☐ Disputed				
Who owes the de	bt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as	mortgage or sec	ured		
Debtor 2 only		car loan)				
Debtor 1 and De	•	Statutory lien (such as tax lien, med	chanic's lien)			
	e debtors and another	☐ Judgment lien from a lawsuit	A ( - 1			
Check if this cla		Other (including a right to offset)	Auto Ioan			
Date debt was incu	12-29-2017	Last 4 digits of account num	ber <u>3330</u>			
	•	Column A on this page. Write that num		\$16,73	7.01	
Write that number		I the dollar value totals from all pages.		\$16,73	7.01	
Part 2: List Oth	ers to Be Notified fo	or a Debt That You Already Listed				
trying to collect fro	m you for a debt you o	be notified about your bankruptcy for a owe to someone else, list the creditor i at you listed in Part 1, list the additiona his page.	in Part 1, and th	nen list the collection ag	gency here. Similarly, if	you have more
	per, Street, City, State &					
GM Finan		ZIP OUUC	On whic	ch line in Part 1 did you ei	nter the creditor? 2.1	
PO Bxo 1	81145		Last 4 d	ligits of account number _	_	
Arlington	, TX 76096					

Ca	36 1.19-DK-13320	Document Document	Page 1	.e.eu 03/11/13 03.	)4.03 L	Jest Main
Fill in this inf	ormation to identify your cas		Paue 1	8 01 49		
Debtor 1	Heather Nichole Ky	le .				
DODIOI 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	SOUTHERN DISTRICT OF	OHIO			
Case number						
(if known)						Check if this is an
					а	mended filing
Official Fo	orm 106E/F					
	E/F: Creditors Wh	o Have Unsecure	d Claims			12/15
	and accurate as possible. Use F			Part 2 for creditors with NON	PRIORITY clai	
Schedule D: Cre left. Attach the ( name and case	ecutory Contracts and Unexpire editors Who Have Claims Secure Continuation Page to this page. number (if known).	ed by Property. If more space If you have no information to	is needed, copy	the Part you need, fill it out, n	number the en	tries in the boxes on the
	t All of Your PRIORITY Unse ditors have priority unsecured c					
		iainis against you :				
■ No. Go	to Part 2.					
☐ Yes.	4 All of Vous NONDDIODITY	Unaccured Claims				
	t All of Your NONPRIORITY ditors have nonpriority unsecure					
☐ No. You	have nothing to report in this part.	. Submit this form to the court w	ith your other sch	edules.		
Yes.						
unsecured	your nonpriority unsecured claim claim, list the creditor separately fo editor holds a particular claim, list t	r each claim. For each claim lis	ted, identify what	type of claim it is. Do not list cla	ims already inc	cluded in Part 1. If more
						Total claim
Ame	rican Honda Finance					
	oration	Last 4 digits of a	ccount number			\$2,548.00
•	ority Creditor's Name	When was the de	eht incurred?	2016		
_	of Industry, CA 91716-00(		.bt incurred :	2010		-
Numbe	er Street City State Zip Code		ou file, the claim	is: Check all that apply		
	ncurred the debt? Check one.					
	btor 1 only	☐ Contingent				
	btor 2 only	☐ Unliquidated				
☐ Del	btor 1 and Debtor 2 only	☐ Disputed				
	east one of the debtors and another	_		d claim:		
	eck if this claim is for a commu					
debt Is the	claim subject to offset?	☐ Obligations ar report as priority of		aration agreement or divorce that	at you did not	
■ No				ng plans, and other similar debts	S	
— 110 □ ∨ <sub>0</sub> 0		·	Auto renos	•		

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 19 of 49

Debi	or 1 Heatner Nichole Kyle	Case number (if known)	
4.2	CBE Group	Last 4 digits of account number 0211	\$597.79
	Nonpriority Creditor's Name 1309 Technology Parkway PO Box 900 Cedar Falls, IA 50613	When was the debt incurred? 2017	_
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Collections	=
4.3	Choice Recovery, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	\$604.00
	PO Box 20790 Columbus, OH 43220	When was the debt incurred? 2014	_
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Collections	_
4.4	CMRE Financial services, Inc.  Nonpriority Creditor's Name	Last 4 digits of account number	\$55.00
	3075 Imperial Hwy., Suite 200 Brea, CA 92821-6753	When was the debt incurred? 2018	_
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other Specify Collection account	

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 20 of 49

Debt	or 1 Heather Nichole Kyle	Case number (if known)	
4.5	CNAC	Last 4 digits of account number	\$7,200.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 12802 Hamilton Crossing Blvd. Carmel, IN 46032	When was the debt incurred? 2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Totaled automobile	
4.6	Credit Collection Service Nonpriority Creditor's Name	Last 4 digits of account number	\$51.00
	PO Box 607 Norwood, MA 02062	When was the debt incurred? 2014	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify Collection account	
4.7	Diversified Adjustments	Last 4 digits of account number	\$2,048.00
	Nonpriority Creditor's Name 600 Coon Rapids Blvd. NW	When was the debt incurred? 2019	
	Minneapolis, MN 55433  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a separation agreement or divorce that you did not</li></ul>	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other, Specify Collection account	

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 21 of 49

Heatner Nichole Kyle	Case number (if known)	
Diversified Consultants, Inc.	Last 4 digits of account number	\$236.00
Nonpriority Creditor's Name DCI	When was the debt incurred? 2019	
PO Box 551268	2010	
Jacksonville, FL 32255	_	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?  ■ No	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes		
☐ Yes	Other. Specify Collection account	
Enhanced Basevery Corneration	Last 4 digits of account number	\$389.00
Enhanced Recovery Corporation  Nonpriority Creditor's Name	Last 4 digits of account number	\$309.00
PO Box 57547	When was the debt incurred? 2019	
Jacksonville, FL 32241		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collection account	
IC Systems Collections		\$170.00
Nonpriority Creditor's Name	Last 4 digits of account number	ψ170.00
PO Box 64378	When was the debt incurred? 2019	
Saint Paul, MN 55164-0378		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Collection account	

Document Page 22 of 49 Debtor 1 Heather Nichole Kyle ase number (if known) 4.1 Jeff Tiemeier Unknown None Last 4 digits of account number Nonpriority Creditor's Name **4810 Rivercrest Drive** When was the debt incurred? Unknown Harrison, OH 45030 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other, Specify Any debts owed or alleged to be owed ☐ Yes Multiple 4.1 Nelnet \$48,160,00 Last 4 digits of account number **Accounts** Nonpriority Creditor's Name PO Box 82505 When was the debt incurred? 2014-2016 Lincoln, NE 68501 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ■ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Federal student loans 4.1 Paul Kyle, Jr. None Unknown Last 4 digits of account number Nonpriority Creditor's Name 4810 Rivercrest Drive When was the debt incurred? Unknown Harrison, OH 45030 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

 $\square$  Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Any debts owed or alleged to be owed

Is the claim subject to offset?

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 23 of 49

Debt	or 1 Heather Nichole Kyle		Case number (if known)	
4.1 4	Phoenix Financial Services LLC	Last 4 digits of account number		\$413.00
<del>-</del>	Nonpriority Creditor's Name PO Box 26580	When was the debt incurred?	2018	· · · · · · · · · · · · · · · · · · ·
	Indianapolis, IN 46226  Number Street City State Zip Code	— As of the data way file the eleits	in Charle all that analy	
	Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Пол		
	_	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans	u Claiii.	
	☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	tration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical Co	llections	
4.1	Progressive Leasing	Last 4 digits of account number	2752	\$374.63
5	Nonpriority Creditor's Name			Ψοισο
	NPRTO Ohio LLC	When was the debt incurred?	2018	
	256 West Data Drive			
	Draper, UT 84020  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,, ,, , ,	an anat app.,	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Credit pure	chases	
4.1 6	Stoneleigh Recovery Associates	Last 4 digits of account number		Unknown
	Nonpriority Creditor's Name	_		
	810 Springer Drive	When was the debt incurred?	2018	
	Lombard, IL 60148  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	7.6 6. 11.6 44.6 764 11.6, 11.6 6.41.11	or officer an anat appry	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	_	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	<u> </u>	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	

### Part 3: List Others to Be Notified About a Debt That You Already Listed

■ Other. Specify Collection account

☐ Yes

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 24 of 49

Debtor 1 Heather Nichole Kyle	Document P	age 24 0T 49 Case number (if known)
Name and Address Cincinnati Bell P.O. Box 748001 Cincinnati, OH 45274-8001	On which entry in Part 1 or Part Line 4.8 of (Check one):  Last 4 digits of account number	t 2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address EMP of Cincinnati PO Box 19000 Belfast, ME 04915-4085	On which entry in Part 1 or Part Line 4.14 of (Check one):  Last 4 digits of account number	t 2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Mercy Health PO BOX 630804 Cincinnati, OH 45263	On which entry in Part 1 or Part Line 4.2 of (Check one):  Last 4 digits of account number	t 2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Mercy Health PO Box 630827 Cincinnati, OH 45263-0827	On which entry in Part 1 or Part Line 4.2 of (Check one):  Last 4 digits of account number	t 2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Qualified Emergency Specialists, Inc. 10506 Montgomery Road Suite 209 Cincinnati, OH 45242	On which entry in Part 1 or Part Line 4.3 of (Check one):  Last 4 digits of account number	t 2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Sprint PO Box 629023 El Dorado Hills, CA 95762	On which entry in Part 1 or Part Line 4.7 of (Check one):  Last 4 digits of account number	t 2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address US Department of Education 3130 Fairview Park Drive Suite 800 Falls Church, VA 23323	On which entry in Part 1 or Part Line 4.12 of (Check one):  Last 4 digits of account number	t 2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 48,160.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 14,686.42

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Page 25 of 49 Case number (if known) Document

Debtor 1 Heather Nichole Kyle

Total Nonpriority. Add lines 6f through 6i.

6j.

\$

62,846.42

			III I UUC ZU (II <del>T</del> o	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Heather Nichole	Kyle		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				
(**************************************				

# Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	
	•				

		Docume	nt Page 27 of 49	
Fill in th	is information to identify your	case:		
Debtor 1	Heather Nichole	Kvle		
	First Name	Middle Name	Last Name	
Debtor 2		AC. ( )		
(Spouse if, t	filing) First Name	Middle Name	Last Name	
United S	tates Bankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case nur	mher			
(if known)				☐ Check if this is an
				amended filing
~ · · ·	1.5 40011			
	al Form 106H			
Sche	dule H: Your Cod	ebtors		12/15
	,	•	do not list either spouse as a codebtor.	
■ Ye				
_ ''	<del>5</del> 5			
			operty state or territory? (Community pro erto Rico, Texas, Washington, and Wiscon	
■ N	o. Go to line 3.			
□ Ye	es. Did your spouse, former spo	use, or legal equivalent live	with you at the time?	
in lir Forn	ne 2 again as a codebtor only i	if that person is a guarant	spouse as a codebtor if your spouse is tor or cosigner. Make sure you have list ule G (Official Form 106G). Use Schedul	ed the creditor on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		e creditor to whom you owe the debt edules that apply:
3.1	Jeff Tiemeier		☐ Schedule	D line
0.1	4810 Rivercrest Drive			E/F, line <b>4.1</b>
	Harrison, OH 45030		□ Schedule	
				onda Finance Corporation
3.2	Paul Kyle 4810 Rivercrest Drive		☐ Schedule	
	Harrison, OH 45030			E/F, line <b>4.5</b>
	,		☐ Schedule CNAC	G

# Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 28 of 49

						1			
	in this information to identify your btor 1 Heather N	chole Kyle							
	otor 2  ouse, if filing)	•							
Uni	ted States Bankruptcy Court for t	ne: SOUTHERN DISTRIC	CT OF OHIO						
	se number nown)		-				ded filing ment showin	ng postpetition chapter ollowing date:	
0	fficial Form 106I					MM / DD			
S	chedule I: Your Inc	come				1411417 2527		12/1	
spo atta	plying correct information. If you use. If you are separated and you has separate sheet to this form  Describe Employmen	our spouse is not filing w n. On the top of any additi	ith you, do not inclu	de infori	mati	on about your s	pouse. If m	ore space is needed,	
1.	Fill in your employment information.		Debtor 1			Debto	r <b>2 or non-f</b> i	iling spouse	
	If you have more than one job,	Employment status	■ Employed			☐ Em	ployed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not	☐ Not employed		
	employers.	Occupation	RN (\$25.00 X 24	/week)					
	Include part-time, seasonal, or self-employed work.	Employer's name	ProLink Healtho	are, LL	.C				
	Occupation may include studen or homemaker, if it applies.	t Employer's address	10700 Montgom Cincinnati, OH		ad, i	<b>#207</b>			
		How long employed t	here? 2 mont	hs					
Pai	t 2: Give Details About M	onthly Income							
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to re	eport for	any l	line, write \$0 in th	ne space. Ind	clude your non-filing	
	u or your non-filing spouse have e space, attach a separate sheet		ombine the information	n for all e	emplo	oyers for that per	son on the li	ines below. If you need	
						For Debtor 1		ebtor 2 or ing spouse	
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$	2,600.00	<b>)</b> \$	N/A	
3.	Estimate and list monthly over	rtime pay.		3.	+\$	0.00	) +\$	N/A	

2,600.00

N/A

Calculate gross Income. Add line 2 + line 3.

# Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 29 of 49

Debt	or 1	Heather Nichole Kyle	_	Case r	number (if known)		
				For	Debtor 1	For	Debtor 2 or
						non-	filing spouse
	Cop	y line 4 here	4.	\$	2,600.00	\$	N/A
5.	List	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	566.80	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A
	5e.	Insurance	5e.	\$	216.19	\$	N/A
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.+	- \$ - \$	0.00	\$ +\$	N/A N/A
_			_	· —		· -	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	782.99	\$	N/A
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,817.01	\$	N/A
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total					
		monthly net income.	8a.	\$	0.00	\$	N/A
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A
	8e.	Social Security	8e.	\$	0.00	\$	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$	0.00	\$	N/A
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A
	8h.	Other monthly income. Specify:	8h.+	- \$	0.00	+ \$	N/A
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	1	+ \$_		N/A = \$ 1,817.01
11.	Inclu othe	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your refriends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	depen		•		chedule J. 11. +\$ 0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					12. \$ 1,817.01 Combined
13.	Dov	you expect an increase or decrease within the year after you file this form	?				monthly income
		No.	•				
		Yes. Explain: A. Debtor was divorced on 7-11-2019. She is owe	ed not	hing f	rom the divor	ce.	

Official Form 106l Schedule I: Your Income page 2

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 30 of 49

Fill in	this informa	tion to identify yo	our case:					
Debto	r 1	Heather Nicl	nole Kyle				ck if this is:	
Debto	ır 2						An amended filing  A supplement show	wing postpetition chapter
	se, if filing)						13 expenses as of	
United	d States Bankr	ruptcy Court for the	: SOUTH	IERN DISTRICT OF OHIO	1		MM / DD / YYYY	
Case	number							
(If kno	own)							
Off	icial Fo	rm 106J						
Sc	hedule	J: Your	Exper	ises				12/1
Be as	s complete a	and accurate as	possible eded, atta	If two married people ar ch another sheet to this				
Part 1	1: Descr Is this a joir	ibe Your House	hold					
	_							
	■ No. Go to		in a sonar	ate household?				
ļ	□ 163. <b>D00</b>		iii a sepai	ate nousenoia:				
			st file Offici	al Form 106J-2, Expenses	for Separate House	e <i>hold</i> of Deb	otor 2.	
				-, -, -, -, -, -, -, -, -, -, -, -, -, -				
2. I	Do you have	e dependents?	■ No					
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
				caon acpendent	Debtor 1 or Debto		uge	
	Do not state dependents							□ No □ Yes
•	acpenaents	names.						☐ Yes
								□ Yes
								□ No
								☐ Yes
								□ No
2 1	Da							☐ Yes
		enses include f people other t	han	No				
3	yourself and	d your depende	nts? ⊔	Yes				
Part 2	2: Estim	ate Your Ongoi	na Monthi	v Expenses				
Estin	nate your ex	penses as of y	our bankr	uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
	alue of sucl		d have inc	cluded it on Schedule I: \	our Income		Your exp	enses
(Onic	Jiai i Oilli iu							
		or home owners and any rent for th		ses for your residence. I r lot.	nclude first mortgag	e 4. S	<b>.</b>	500.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. S	<b>S</b>	0.00
		rty, homeowner's	s, or renter	's insurance		4a. 3	·	0.00
	•	•	-	ıpkeep expenses		4c. §		0.00
		owner's associa				4d. 9	·	0.00
5.	Additional r	nortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$	5	0.00

#### Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 31 of 49

		` _	
Utilities:			
	6a.	\$	95.00
6b. Water, sewer, garbage collection	6b.	\$	0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
3d. Other. Specify:	6d.	\$	0.00
· · · · · · · · · · · · · · · · · · ·	7.	\$	210.00
	8.	\$	0.00
	9.	\$	60.00
· · · · · · · · · · · · · · · · · · ·		\$	40.00
		·	55.00
•			
	12.	\$	190.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	40.00
Charitable contributions and religious donations	14.	\$	0.00
nsurance.			
Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.	\$	0.00
15c. Vehicle insurance	15c.	\$	99.00
15d. Other insurance. Specify:	15d.	\$	0.00
Faxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specify:	16.	\$	0.00
17a. Car payments for Vehicle 1	17a.		0.00
		\$	0.00
17c. Other. Specify: Planned auto payment after case filing (See below)	17c.	\$	375.00
17d. Other. Specify:	17d.	\$	0.00
	3		2.22
	18.	· <u> </u>	0.00
		·	0.00
· · ·			
			0.00
		· ·	0.00
		· -	0.00
• •		·	0.00
		·	0.00
		·	0.00
Other: Specify: Cell phone	21.	+\$	100.00
Dog		+\$	50.00
Calculate your monthly expenses			
		•	1 914 00
			1,814.00
		·	4.044.55
zzc. Add line zza and zzb. The result is your monthly expenses.		<b>5</b>	1,814.00
Calculate your monthly net income.			
	23a	\$	1,817.01
		·	1,814.00
152. Copy your monany expenses from mile 220 above.	200.		1,014.00
23c. Subtract your monthly expenses from your monthly income.			
The result is your <i>monthly net income</i> .	23c.	<b>S</b>	3.01
	Signature of the composition of	6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. Telephone, cell phone 6d. Other. Specify: 6d. Other insurance, and dry cleaning 6d. Specify: 6d. Other insurance, and support that you did not report as deducted from your pay or included in lines 4 or 20. 6d. Other insurance. 6d. Other insurance 6d. Specify: 6d. Other insurance deducted from your pay or included in lines 4 or 20. 6d. Other insurance 6d. Specify: 6d. Other Specify: 6d. Oth	Sa. Electricity, heat, natural gas Sb. Water, sewer, garbage collection Sc. Telephone, cell phone, Internet, satellite, and cable services Sc. Johner, Specify: Sc. God and housekeeping supplies Childcare and children's education costs Sc. Scholing, laundry, and dry cleaning Scressonal care products and services Scholing, laundry, and dry cleaning Scressonal care products and services Scholing, laundry, and dry cleaning Scressonal care products and services Scholing, laundry, and dry cleaning Scressonal care products and services Scholing, laundry, and dry cleaning Scressonal care products and services Scholing, laundry, and dry cleaning Scressonal care products and services Scholing, laundry, and dry cleaning Scressonal care products and services Scholing, laundry, and dry cleaning Scressonal care products and services Scholing, laundry, and dry cleaning Scressonal care products and services Scressonal care pr

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

■ No.
-------

☐ Yes.

Explain here: A. Replacement vehicle: Debtor has replaced three transmission in her current car, so she is surrendering the same. The payment on that car loan is \$464.61.

# Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 32 of 49

		case:			
Debtor 1	Heather Nichole	Kyle			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case number					
(if known)					☐ Check if this is an
					amended filing
Declarat	ion About a	an Individual	Debtor's Sc	hedules	12/15
f two married pe	eople are filing togethe	r, both are equally respo	nsible for supplying corr	ect information.	
•					
				Making a false statement,	
			kruptcy case can result in	n fines up to \$250,000, or in	nprisonment for up to 20
years, or both. 1	8 U.S.C. §§ 152, 1341, 1	1519, and 3571.			
Sign					
Sigi	n Below				
		eone who is NOT an attor	ney to help you fill out b	ankruptcy forms?	
		eone who is NOT an attor	rney to help you fill out b	ankruptcy forms?	
Did you pa  ■ No	y or agree to pay some	eone who is NOT an attor	ney to help you fill out b		Petition Prenarer's Notice
Did you pa  ■ No		eone who is NOT an attor	ney to help you fill out b	Attach <i>Bankruptcy</i>	Petition Preparer's Notice, ignature (Official Form 119)
Did you pa  ■ No	y or agree to pay some	eone who is NOT an attor	ney to help you fill out b	Attach <i>Bankruptcy</i>	
Did you pa  ■ No □ Yes. N	y or agree to pay some			Attach Bankruptcy  Declaration, and S.	
Did you pa  No Yes. N	y or agree to pay some			Attach <i>Bankruptcy</i>	
Did you pa  No Yes. N  Under pena	y or agree to pay some  Name of person  Ity of perjury, I declare			Attach Bankruptcy  Declaration, and S.	
Did you pa  No Yes. N  Under pena that they are	y or agree to pay some  Name of person  lity of perjury, I declare e true and correct.		mary and schedules filed	Attach Bankruptcy Declaration, and S d with this declaration and	
Did you pa  No Yes. N  Under pena that they are X  /s/ Hea Heather	y or agree to pay some  Name of person  lity of perjury, I declare e true and correct.		mary and schedules filed	Attach Bankruptcy Declaration, and S d with this declaration and	

# Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 33 of 49

31	ll in this inforn	nation to identify you	ur case:					
De	ebtor 1	Heather Nichol	e Kyle  Middle Name		Last Name			
De	ebtor 2	riistivame	Wildle Name		Last Name			
(Sp	ouse if, filing)	First Name	Middle Name		Last Name			
Ur	nited States Bar	nkruptcy Court for the	: SOUTHERN DISTRICT	Γ OF OHI	0			
Ca	ase number							
(if k	known)						_	eck if this is an
							am	ended filing
$\bigcirc$	fficial Ec	rm 107						
	fficial Fo		Affaire for Indiv	اميامان	s Eiling for B	ankruntav		414
			Affairs for Indiv					4/1
info	ormation. If m	ore space is needed	sible. If two married people I, attach a separate sheet t					
nui	mber (if knowr	n). Answer every que	estion.					
Pa	rt 1: Give D	Details About Your M	arital Status and Where Y	ou Lived	Before			
1.	What is you	r current marital stat	us?					
	☐ Married							
	■ Not mar							
2.	During the Is	ast 3 years have you	ı lived anywhere other tha	n where	vou live now?			
۷.	_	ast 5 years, nave you	a nived anywhere other tha	iii wiicic	you live now :			
	□ No □ Vac Lie	at all of the places you	lived in the last 2 years. Do	not inclu	da udaga yay liya nay			
	■ Yes. Lis	st all of the places you	lived in the last 3 years. Do	not inclu	de where you live now	<i>1</i> .		
	Debtor 1 Pr	rior Address:	Dates Debtor lived there	1	Debtor 2 Prior Ad	Idress:		Dates Debtor 2 lived there
	4810 Rive	rcrest Drive	From-To:		☐ Same as Debtor	1		☐ Same as Debtor 1
	Harrison,	OH 45030	1-2014 to 5-	2017				From-To:
	404 North	Finley Street	From-To:		По			По
	Cleves, Ol		5-2017 to 3-	2018	☐ Same as Debtor	1		☐ Same as Debtor 1 From-To:
_								
3. sta			ever live with a spouse or la alifornia, Idaho, Louisiana, N					
	■ N.							
	■ No □ Yes. Ma	ake sure vou fill out <i>Sc</i>	chedule H: Your Codebtors (	(Official F	orm 106H).			
			modulo i ii i odi. Godobioro (	, •	1001.,1			
Pa	rrt 2 Explai	in the Sources of Yo	ur Income					
4.	Fill in the tota	al amount of income y	mployment or from operation received from all jobs and	d all busir	nesses, including part	-time activities.	ıs calend	dar years?
	if you are filin	ng a joint case and yo	u have income that you rece	eve toget	ner, list it only once ur	nder Deptor 1.		
	□ No							
	Yes. Fill	I in the details.						
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.	(bef	oss income fore deductions and lusions)	Sources of income Check all that apply		Gross income (before deductions and exclusions)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Page 34 of 49
Case number (if known) Document

Debtor 1 Heather Nichole Kyle

	Debterra		Debtor 2		
	Debtor 1				
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
From January 1 of current year until the date you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$18,023.69	☐ Wages, commissions, bonuses, tips		
	☐ Operating a business		☐ Operating a business		
For last calendar year: (January 1 to December 31, 2018)	■ Wages, commissions, bonuses, tips	\$40,000.00	☐ Wages, commissions, bonuses, tips		
	☐ Operating a business		☐ Operating a business		
For the calendar year before that: (January 1 to December 31, 2017)	■ Wages, commissions, bonuses, tips	\$27,000.00	☐ Wages, commissions, bonuses, tips		
	☐ Operating a business		☐ Operating a business		
For the calendar year: (January 1 to December 31, 2016)	■ Wages, commissions, bonuses, tips	\$13,526.00	☐ Wages, commissions, bonuses, tips		
	☐ Operating a business		☐ Operating a business		
■ No □ Yes. Fill in the details.	Debtor 1 Sources of income Describe below.	Gross income from each source	Debtor 2 Sources of income Describe below.	Gross income (before deductions	
	2000,000 20,000	(before deductions and exclusions)	200020 20.0	and exclusions)	
Part 3: List Certain Payments You	u Made Before You Filed for I	Bankruptcy			
	Debtor 2 has primarily consu	ımer debts. Consumer debts	s are defined in 11 U.S.C. § 10	1(8) as "incurred by an	
, ,	individual primarily for a personal, family, or household purpose."				
□ No. Go to line	fore you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?				
☐ Yes List below	v each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount y				
not include	creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do e payments to an attorney for this bankruptcy case.  ent on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.				
	Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?				
■ No. Go to line					
include pa	Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments attorney for this bankruptcy case.				

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Page 35 of 49 Document Case number (if known) Debtor 1 Heather Nichole Kyle **Creditor's Name and Address** Dates of payment Total amount Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment paid still owe 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Nο ☐ Yes. List all payments to an insider Insider's Name and Address **Total amount** Amount you Reason for this payment Dates of payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Heather Kyle v. Paul R Kyle, Jr. Dissolution of **Hamilton County Court of** □ Pending DR19-00973 Marriage **Common Pleas** □ On appeal **Division of Domestic** Concluded Relations 1000 Main Street Cincinnati, OH 45202 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

Yes. Fill in the details. 

**Creditor Name and Address** Describe the action the creditor took Date action was Amount taken

Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

☐ Yes

		Document	Page 36 of 49	
Debtor 1	Heather Nichole Kyle		Case number (if known)	

Par	t 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No □ Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift or co							
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal Describe what you contributed	Dates you contributed	Value				
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?  No Yes. Fill in the details.							
	how the loss occurred	Describe any insurance coverage for the loss nclude the amount that insurance has paid. List pending nsurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost				
Par	t 7: List Certain Payments or Transfers							
16.	consulted about seeking bankruptcy or p	tcy, did you or anyone else acting on your behalf pay or reparing a bankruptcy petition? eparers, or credit counseling agencies for services required		rty to anyone you				
	□ No							
	Yes. Fill in the details.	Decariation and value of any property	Data navment	Amount of				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
	Steiden Law Offices 411 Madison Avenue Covington, KY 41011 esteiden@steidenlaw.com	Legal Fees: \$750.00	7-12-2019	\$750.00				
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.							
	■ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				

Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Case 1:19-bk-13328 Page 37 of 49
Case number (if known) Document

Debtor 1 Heather Nichole Kyle

18.	8. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and v			any property or s received or debts schange	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankruptobeneficiary? (These are often called asset-prote No Yes. Fill in the details.		ny property to a	self-settled tr	ust or similar device o	f which you are a
	Name of trust	Description and v	value of the prop	perty transferi	red	Date Transfer was
		·		•		made
Par	t 8: List of Certain Financial Accounts, Instr	uments, Safe Deposi	t Boxes, and Sto	orage Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred?	were any financial ac	counts or instru	uments held i	n your name, or for yo	ur benefit, closed,
	Include checking, savings, money market, or chouses, pension funds, cooperatives, associated No.				hares in banks, credit	unions, brokerage
	Yes. Fill in the details.					
		ast 4 digits of ccount number	Type of account instrument	clo	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	r bankruptcy, an	y safe deposi	it box or other deposit	ory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	r home within 1	year before y	ou filed for bankruptcy	/?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control fo	r Someone Else				
23.	Do you hold or control any property that some for someone.	eone else owns? Incl	ude any propert	y you borrow	ed from, are storing fo	or, or hold in trust
■ No						
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the	property	Value
Par	t 10: Give Details About Environmental Inform	mation				
For	the purpose of Part 10, the following definition	s apply:				
	Environmental law means any federal, state, o	or local statute or reg	ulation concerni	ing pollution,	contamination, releas	es of hazardous or

Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Page 38 of 49 Case number (if known) Document

Debtor 1 Heather Nichole Kyle

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.					
Rep	ort all notices, releases, and proceedings that	you know about, regardless of wher	n they occurred.			
24.	Has any governmental unit notified you that y	ou may be liable or potentially liable	under or in violation of an environme	ntal law?		
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of ar	ny release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or admir	nistrative proceeding under any envi	ironmental law? Include settlements a	nd orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	t 11: Give Details About Your Business or Co	onnections to Any Business				
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have ar	ny of the following connections to any	business?		
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
	☐ A member of a limited liability compar	ny (LLC) or limited liability partnersh	ip (LLP)			
	☐ A partner in a partnership					
	☐ An officer, director, or managing executive of a corporation					
	☐ An owner of at least 5% of the voting or equity securities of a corporation					
	■ No. None of the above applies. Go to Part 12.					
	Yes. Check all that apply above and fill in the details below for each business.					
	Address	Describe the nature of the business	Employer Identification number Do not include Social Security n	umber or ITIN.		
	(Number, Offeet, Oily, State and 211 Code)	Name of accountant or bookkeeper	Dates business existed			
28.	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	r, did you give a financial statement	to anyone about your business? Inclu	de all financial		
	■ No □ Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Debtor 1 Heather Nichole Kyle

Debtor 1 Heather Nichole Kyle

Case number (if known)

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Heather Nichole Kyle

Heather Nichole Kyle

Signature of Debtor 2

Signature of Debtor 1

Date

September 5, 2019

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 40 of 49

B2030 (Form 2030) (12/15)

## United States Bankruptcy Court Southern District of Ohio

In re	Heather Nichole Kyle		Case No	).	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPI	ENSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 ompensation paid to me within one year before the file rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy,	or agreed to be pa	id to me, for servi	
	For legal services, I have agreed to accept		\$	750.00	
	Prior to the filing of this statement I have received	d	\$	750.00	
	Balance Due		\$	0.00	
2. T	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. <b>I</b>	I have not agreed to share the above-disclosed con	npensation with any other person	unless they are me	mbers and associa	ntes of my law firm.
[	☐ I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n				my law firm. A
5. I	n return for the above-disclosed fee, I have agreed to	render legal service for all aspect	s of the bankruptc	case, including:	
b c	<ul> <li>Analysis of the debtor's financial situation, and ren.</li> <li>Preparation and filing of any petition, schedules, st</li> <li>Representation of the debtor at the meeting of cred.</li> <li>[Other provisions as needed]</li> <li>exemption planning; review and filing</li> </ul>	atement of affairs and plan which itors and confirmation hearing, an	may be required; nd any adjourned h	-	bankruptcy;
5. E	By agreement with the debtor(s), the above-disclosed for a representation of the debtors in continuity including without limitation motions for representation of the debtors in adversecover property, dischargeability actinuity discharge	fee does not include the following ested matters, motions on bor lien avoidance ersary proceedings of any na	g service: ehalf of debtor, ature, including	without limitation	on actions to
	Additional attorney fees would apply t	o the aforesaid matters.			
		CERTIFICATION			
	certify that the foregoing is a complete statement of ankruptcy proceeding.	any agreement or arrangement for	payment to me fo	representation of	the debtor(s) in
Se	eptember 5, 2019	/s/ Eric A. Steider			
Da	nte	Eric A. Steiden, E		8 KY: 88321	
		Signature of Attorne Steiden Law Offic			
		411 Madison Ave			
		Covington, KY 41			
		(513) 888-8888 F esteiden@steide		10	

Name of law firm

Fill in this info							
FIII IN THIS INTO	rmation to identify your case:			eck one box ( 2A-1Supp:	only as d	irected in this form and	I in Form
Debtor 1	Heather Nichole Kyle			2A-10upp.			
Debtor 2 (Spouse, if filing)			'	■ 1. There is	no pres	umption of abuse	
United States	Bankruptcy Court for the: Southern District o	f Ohio				o determine if a presur	•
0						nade under <i>Chapter 7</i> icial Form 122A-2).	Means Test
Case number				☐ 3. The Me	ans Test	does not apply now be received apply service but it could apply	
				☐ Check if	this is a	n amended filing	
Official F	Form 122A - 1					· ·	
	7 Statement of Your Cur	rent Mor	nthly Inc	ome			12/1
attach a separa case number (if qualifying milita	and accurate as possible. If two married people a te sheet to this form. Include the line number to w known). If you believe that you are exempted fror ary service, complete and file Statement of Exemp alculate Your Current Monthly Income	hich the additior n a presumption	nal information a of abuse becau	applies. On the	top of ai	ny additional pages, wri	te your name and or because of
	your marital and filing status? Check one on	lv					
	narried. Fill out Column A, lines 2-11.	· y .					
	ed and your spouse is filing with you. Fill ou	t hoth Columns	A and B lines	2-11			
	ed and your spouse is NOT filing with you.			2-11.			
	ring in the same household and are not lega	_	-	lumns A and	R lines 1	2-11	
	ring separately or are legally separated. Fill of						ı declare under
ре	enalty of perjury that you and your spouse are leading apart for reasons that do not include evading	gally separated	d under nonban	kruptcy law t	nat applie	es or that you and your	
101(10A). Fo the 6 months	rerage monthly income that you received from all or example, if you are filing on September 15, the 6-mes, and the income for all 6 months and divide the total of the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 throusult. Do not include	ugh August 31. de any income	If the amo amount m	ount of your monthly incon ore than once. For examp	ne varied during ble, if both
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	oss wages, salary, tips, bonuses, overtime, a eductions).	and commissio	ons (before all	\$3,1	24.14	\$	
	<b>and maintenance payments.</b> Do not include B is filled in.	payments from	a spouse if	\$	0.00	\$	
of you o from an o and roon	unts from any source which are regularly par r your dependents, including child support. unmarried partner, members of your household nmates. Include regular contributions from a sp	Include regular, your depende	contributions nts, parents,	\$	0.00	\$	
	Do not include payments you listed on line 3. one from operating a business, profession,	or farm		<b>—</b>			
	,		otor 1				
Gross re	ceipts (before all deductions)	\$0.00					
Ordinary	and necessary operating expenses	-\$0.00					
Net mon	thly income from a business, profession, or farr	n \$ <b>0.00</b> _	Copy here ->	\$	0.00	\$	
6. Net inco	me from rental and other real property		40.04				
			otor 1				
	ceipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>					
_	and necessary operating expenses	· <u> </u>	Copy here ->	\$	0.00	\$	
	thly income from rental or other real property	<b>D.00</b>	Jopy Hele ->	\$	0.00	\$	
/. Interest,	dividends, and royalties			Ψ	5.55		

Official Form 122A-1

Case 1:19-bk-13328 Doc 1 Filed 09/11/19 Entered 09/11/19 03:54:09 Desc Main Document Page 42 of 49

**Heather Nichole Kyle** Debtor 1 Case number (if known) Column B Column A Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: 0.00 \$ For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 \$ benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 \$ 0.00 Total amounts from separate pages, if any. \$ 11. Calculate your total current monthly income. Add lines 2 through 10 for 3,124.14 3.124.14 \$ \$ each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 3,124.14 Multiply by 12 (the number of months in a year) **x** 12 37,489.68 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: OH Fill in the state in which you live. 1 Fill in the number of people in your household. 49,624.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Heather Nichole Kyle **Heather Nichole Kyle** Signature of Debtor 1 Date September 5, 2019 MM / DD / YYYY

If you checked line 14a. do N

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Case number (if known)

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 03/01/2019 to 08/31/2019.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: NAPHCARE Inc.

Income by Month:

6 Months Ago:	03/2019	\$4,007.20
5 Months Ago:	04/2019	\$3,476.88
4 Months Ago:	05/2019	\$2,899.68
3 Months Ago:	06/2019	\$0.00
2 Months Ago:	07/2019	\$0.00
Last Month:	08/2019	\$0.00
	Average per month:	\$1,730.63

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: ProLink Healthcare LLC

Income by Month:

6 Months Ago:	03/2019	\$0.00
5 Months Ago:	04/2019	\$0.00
4 Months Ago:	05/2019	\$0.00
3 Months Ago:	06/2019	\$0.00
2 Months Ago:	07/2019	\$2,414.50
Last Month:	08/2019	\$2,500.00
	Average per month:	\$819.08

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: St. Elizabeth

Income by Month:

6 Months Ago:	03/2019	\$602.80
5 Months Ago:	04/2019	\$830.94
4 Months Ago:	05/2019	\$152.15
3 Months Ago:	06/2019	\$1,860.68
2 Months Ago:	07/2019	\$0.00
Last Month:	08/2019	\$0.00
	Average per month:	\$574.43

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. American Honda Finance Corporation PO Box 6001 City of Industry, CA 91716-0001

CBE Group 1309 Technology Parkway PO Box 900 Cedar Falls, IA 50613

Choice Recovery, Inc. PO Box 20790 Columbus, OH 43220

Cincinnati Bell P.O. Box 748001 Cincinnati, OH 45274-8001

CMRE Financial services, Inc. 3075 Imperial Hwy., Suite 200 Brea, CA 92821-6753

CNAC

Attn: Bankruptcy Dept. 12802 Hamilton Crossing Blvd. Carmel, IN 46032

Credit Collection Service PO Box 607 Norwood, MA 02062

Diversified Adjustments 600 Coon Rapids Blvd. NW Minneapolis, MN 55433

Diversified Consultants, Inc. DCI PO Box 551268 Jacksonville, FL 32255

EMP of Cincinnati PO Box 19000 Belfast, ME 04915-4085

Enhanced Recovery Corporation PO Box 57547 Jacksonville, FL 32241

GM Financial PO Box 78143 Phoenix, AZ 85062-8143

GM Financial PO Bxo 181145 Arlington, TX 76096 IC Systems Collections PO Box 64378 Saint Paul, MN 55164-0378

Jeff Tiemeier 4810 Rivercrest Drive Harrison, OH 45030

Mercy Health PO BOX 630804 Cincinnati, OH 45263

Mercy Health PO Box 630827 Cincinnati, OH 45263-0827

Nelnet PO Box 82505 Lincoln, NE 68501

Paul Kyle 4810 Rivercrest Drive Harrison, OH 45030

Paul Kyle, Jr. 4810 Rivercrest Drive Harrison, OH 45030

Phoenix Financial Services LLC PO Box 26580 Indianapolis, IN 46226

Progressive Leasing NPRTO Ohio LLC 256 West Data Drive Draper, UT 84020

Qualified Emergency Specialists, Inc. 10506 Montgomery Road Suite 209 Cincinnati, OH 45242

Sprint PO Box 629023 El Dorado Hills, CA 95762

Stoneleigh Recovery Associates 810 Springer Drive Lombard, IL 60148

US Department of Education 3130 Fairview Park Drive Suite 800 Falls Church, VA 23323